



## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Ward

Serial No.: 10/619,723

Filed: July 15, 2003

For:

ELECTRICAL CONNECTOR

APPARATUS, METHODS AND

ARTICLES OF MANUFACTURE

Art Unit: 2833

Examiner: Leon, Edwin A.

#### TRANSMITTAL LETTER

Mail Stop: AF

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

- 1. We enclose the following documents:
- Amendment Transmittal with Certificate of Express Mailing (3 pgs., in duplicate)
- Amendment in Response to Office Action dated September 22, 2004 (6 pgs)
- Return postcard

#### **STATUS**

| 2. Applicant              |                               |  |
|---------------------------|-------------------------------|--|
|                           | claims small entity status.   |  |
| $\overline{\hspace{1cm}}$ | is other than a small entity. |  |

#### **CERTIFICATE OF MAILING/TRANSMISION**

#### Express Mail No.: EV 504792480 US

I hereby certify that this correspondence is, on the date shown below, being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 C.F.R. § 1.10 on the date indicated below in an envelope addressed to the. Commissioner for Patents, Mail Stop: AF, P.O. Box 1450, Alexandria, VA 22313-1450.

Date: December 20, 2004

Dean D. Small, Registration No. 34,730

Armstrong Teasdale LLP

One Metropolitan Square, Suite 2600

St. Louis, MO 63102-2740

314-621-5070

# **EXTENSION OF TERM**

| 3.  | The proce apply.  | edings herein are for a patent app  | ngs herein are for a patent application and the provisions of 37 C.F.R. 1.136                                     |                                  |  |  |  |  |  |  |
|---|---|-------------------------------------|---|----------------------------------|--|--|--|--|--|--|
|   | 11.7  | (complete (a) c                     | (complete (a) or (b), as applicable)  |                                  |  |  |  |  |  |  |
|   | (a)   |                                     | ns for an extension of time under 37 C.F.R. 1.136 F.R. 1.17(a)-(d) for the total number of months checked below:) |                                  |  |  |  |  |  |  |
|   |   | Extension for response within:      | Other than small entity Fee   | Small entity Fee (if applicable) |  |  |  |  |  |  |
|   |   | first month                         | \$ 120.00   | \$ 60.00                         |  |  |  |  |  |  |
|   |   | second month                        | \$ 450.00   | \$ 225.00                        |  |  |  |  |  |  |
|   |   | third month                         | \$1,020.00  | \$ 510.00                        |  |  |  |  |  |  |
|   |   | fourth month                        | \$1,590.00  | \$ 795.00                        |  |  |  |  |  |  |
|   |   | fifth month                         | \$2,160.00  | \$1,080.00                       |  |  |  |  |  |  |
|   |   |                                     | Fee:  | \$                               |  |  |  |  |  |  |
| If a  | n additiona   | l extension of time is required, pl | ease consider this a peti   | tion therefor.                   |  |  |  |  |  |  |
| (Check and complete the next item, if applicable)   |   |                                     |   |                                  |  |  |  |  |  |  |
| An extension of months has already been secured. The fee paid therefor \$ is deducted from the total fee due for the total months of extension now requested. |   |                                     |   |                                  |  |  |  |  |  |  |
| Extension fee due with this request \$  |   |                                     |   |                                  |  |  |  |  |  |  |
|   |   | OR                                  |   |                                  |  |  |  |  |  |  |
|   | (b) X Applicant believes that no extension of term is required. However conditional petition is being made to provide for the possibility the applicant has inadvertently overlooked the need for a petition for of time. |                                     |   |                                  |  |  |  |  |  |  |

## FEE FOR CLAIMS

|                 | (Co                                  | ol. 1)                          |          | (Col. 2)                        | (Col. 3)         | SMALL ENTITY                |        | OTHER THAN<br>SMALL ENTITY |
|-----------------|--------------------------------------|---------------------------------|----------|---------------------------------|------------------|-----------------------------|--------|----------------------------|
|                 | CLA<br>REMA<br>AF                    | AIMS<br>AINING<br>TER<br>IDMENT |          | HIGHEST NO. PREVIOUSLY PAID FOR | PRESENT<br>EXTRA | ADDITIONAL.<br>RATE FEE     | OR     | ADDITIONAL<br>RATE FEE     |
| TOT 4 I         | 11                                   | DIVIDIVI                        | MINUS    | 13                              | =0               | x \$25 = \$0                | T CR   | x \$50 = \$0               |
| TOTAL<br>INDEP. | 4                                    | -                               | MINUS    | 4                               | =0               | x \$100 = \$0               |        | x \$200 = \$0              |
|                 | FIRS                                 | T PRESENT                       | ATION OF | MULTIPLE DEP. (                 | CLAIM            | + \$180 = \$0               |        | + \$360 = \$0              |
|                 |                                      | ·                               |          |                                 |                  | TOTAL ADDITIONAL<br>FEE \$0 | OR     | TOTAL ADDITIONA FEE \$0    |
|                 | (a)                                  |                                 | No add   | itional fee fo                  | r Claims is      | required                    |        |                            |
|                 |                                      |                                 |          |                                 | OR               |                             |        |                            |
|                 | (b)                                  |                                 | Total a  | dditional fee                   | for claims       | required \$ 0               |        |                            |
|                 |                                      |                                 |          | FEH                             | E PAYME          | NT                          |        |                            |
| 5.              | Attached is a check in the sum of \$ |                                 |          |                                 |                  |                             |        |                            |
|                 |                                      | _                               | •        | t Account No<br>this transmit   |                  | the sum of \$ed.            | •      |                            |
|                 |                                      |                                 |          | FEE :                           | DEFICIE          | NCY                         |        |                            |
| 6.              | <u>X</u>                             | If any a 01-238                 |          | al extension                    | and/or fee i     | s required, charge          | Depo   | sit Account No.            |
|                 |                                      |                                 |          |                                 | AND/OR           |                             |        |                            |
|                 | <u>X</u>                             | If any 22384.                   | addition | al fee for clai                 | ms is requ       | ired, charge Deposi         | it Acc | count No. 01-              |
| 7.              |                                      | Other:                          |          |                                 |                  |                             |        | _                          |
|                 |                                      |                                 |          |                                 |                  | ean S                       | · —    | Ma                         |
|                 |                                      |                                 |          |                                 | Dea              | ın D. Small                 |        |                            |

Dean D. Small Reg. No. 34,730 ARMSTRONG TEASDALE LLP One Metropolitan Square, Suite 2600 St. Louis, MO 63102-2740 314/621-5070

1221-04

ertificate of Express Mail No.: EV 504792480 US

**PATENT** 

Attorney Docket No.: 17903 (AT 20958-65)

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Ward

Art Unit: 2833

Serial No.: 10/619,723

Examiner: Leon, Edwin A.

Filed: July 15, 2003

For:

**ELECTRICAL CONNECTOR** 

APPARATUS, METHODS AND

ARTICLES OF **MANUFACTURE** 

#### **AMENDMENT**

Mail Stop: AF

Commissioner for Patents

P.O. Box 1450

Alexandria, Virginia 22313-1450

In response to the Office Action dated September 22, 2004, please amend the aboveidentified patent application as follows: